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PTO/SB/05 (03-01)

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

NUFO011

First Inventor

ZHANG

Title

EXTERNAL CAVITY LASER WITH HIGH SPECTRAL PURITY  
OUTPUT

Express Mail Label No.

EL923480463US

**APPLICATION ELEMENTS**

SEE MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages: 23]  
(preferred arrangement set forth below)
- Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Pages: 3]
5. Oath or Declaration [Total Pages: 4]
- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
- i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☒ Assignment Papers (cover sheet & documents(s))
10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122  
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: \_\_\_\_\_

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_ Group Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

☒ Customer Number or Bar Code Label



or ☐ Correspondence address below

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| Name                            | Robert C. Hall | Registration No. (Attorney/Agent) | 39,209         |                   |  |
| Signature                       | [Signature]    |                                   | Date           | February 26, 2002 |  |

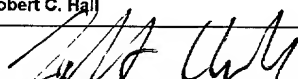
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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

| <b>FEE TRANSMITTAL</b><br><b>for FY 2002</b><br><i>Patent fees are subject to annual revision.</i>   |                       | <b>Complete if Known</b> |  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
|--|-----------------------|--------------------------|--|--|----------------|-----------------|-----------------------|-----------------------|-----------------|----------|--------------------|-------|--------------------|--------|-------------------------------------|-----|-----|-----|-------------------|--|----------------|-----------------|-----------------|----------|---------------------------|-----|-------|-----|------------------------|---|--------------------|------|-----|------|---|-----|------------------------|-----|---------------------|---|---------------------------------------|-----|-----|--------|--|-----|--|-----|-----|---|-----|-----|--|-----|--|-----|-------|-----|-----|---|-----|-------|-----|-----|--|-----|-----|-----|-----|------------------|-----|-----|-----|-----|--|-----|-----|-----|-----|--------------------------|-----|-------|-----|-------|---|-----|-----|-----|----|----------------------------------|-----|-------|-----|-----|------------------------------------|-----|-------|-----|-----|--------------------------------|-----|-----|-----|-----|------------------|-----|-----|-----|-----|-----------------|-----|-----|-----|-----|-------------------------------|-----|----|-----|----|-------------------------------------|-----|-----|-----|-----|---|-----|----|-----|----|--|-----|-----|-----|-----|--|-----|-----|-----|-----|--|-----|-----|-----|-----|---|-----|-----|-----|-----|---|
|  |                       | Application Number       | To Be Assigned   |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
|  |                       | Filing Date              | February 26, 2002 (herewith)   |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
|  |                       | First Named Inventor     | ZHANG  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
|  |                       | Examiner Name            | To Be Assigned   |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| TOTAL AMOUNT OF PAYMENT  |                       | (\$)                     | 1272.00  | Attorney Docket No.  | NUFO011        |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>METHOD OF PAYMENT</b>   |                       |                          | <b>FEE CALCULATION (continued)</b>   |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to:</b><br>Deposit Account Number <b>50-0815</b><br>Deposit Account Name <b>Bozicevic, Field &amp; Francis LLP</b><br><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27   |                       |                          | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examination action</td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(a))</td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td></tr> </tbody> </table> |  |                | Fee Code        | Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid | 105                | 130   | 205                | 65     | Surcharge - late filing fee or oath | 127 | 50  | 227 | 25                | Surcharge - late provisional filing fee or cover sheet | 139            | 130             | 139             | 130      | Non-English specification | 147 | 2,520 | 147 | 2,520                  | For filing a request for ex parte reexamination | 112                | 920* | 112 | 920* | Requesting publication of SIR prior to Examination action | 113 | 1,840*                 | 113 | 1,840*              | Requesting publication of SIR after Examiner action | 115                                   | 110 | 215 | 55     | Extension for reply within first month | 116 | 400  | 216 | 200 | Extension for reply within second month | 117 | 920 | 217  | 460 | Extension for reply within third month | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | 119 | 320 | 219 | 160 | Notice of Appeal | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | 121 | 280 | 221 | 140 | Request for oral hearing | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | 140 | 110 | 240 | 55 | Petition to revive - unavoidable | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | 143 | 460 | 243 | 230 | Design issue fee | 144 | 620 | 244 | 310 | Plant issue fee | 122 | 130 | 122 | 130 | Petitions to the Commissioner | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | 146 | 740 | 246 | 370 | For each additional invention to be examined (37 CFR § 1.129(a)) | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |
| Fee Code   | Large Entity Fee (\$) | Small Entity Fee (\$)    | Fee Description  | Fee Paid   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 105  | 130                   | 205                      | 65   | Surcharge - late filing fee or oath  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 127  | 50                    | 227                      | 25   | Surcharge - late provisional filing fee or cover sheet                     |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 139  | 130                   | 139                      | 130  | Non-English specification  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 147  | 2,520                 | 147                      | 2,520  | For filing a request for ex parte reexamination                            |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 112  | 920*                  | 112                      | 920*   | Requesting publication of SIR prior to Examination action                  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 113  | 1,840*                | 113                      | 1,840*   | Requesting publication of SIR after Examiner action                        |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 115  | 110                   | 215                      | 55   | Extension for reply within first month                                     |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 116  | 400                   | 216                      | 200  | Extension for reply within second month                                    |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 117  | 920                   | 217                      | 460  | Extension for reply within third month                                     |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 118  | 1,440                 | 218                      | 720  | Extension for reply within fourth month                                    |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 128  | 1,960                 | 228                      | 980  | Extension for reply within fifth month                                     |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 119  | 320                   | 219                      | 160  | Notice of Appeal   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 120  | 320                   | 220                      | 160  | Filing a brief in support of an appeal                                     |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 121  | 280                   | 221                      | 140  | Request for oral hearing   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 138  | 1,510                 | 138                      | 1,510  | Petition to institute a public use proceeding                              |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 140  | 110                   | 240                      | 55   | Petition to revive - unavoidable   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 141  | 1,280                 | 241                      | 640  | Petition to revive - unintentional   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 142  | 1,280                 | 242                      | 640  | Utility issue fee (or reissue)   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 143  | 460                   | 243                      | 230  | Design issue fee   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 144  | 620                   | 244                      | 310  | Plant issue fee  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 122  | 130                   | 122                      | 130  | Petitions to the Commissioner  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 123  | 50                    | 123                      | 50   | Processing fee under 37 CFR 1.17(q)  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 126  | 180                   | 126                      | 180  | Submission of Information Disclosure Stmt                                  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 581  | 40                    | 581                      | 40   | Recording each patent assignment per property (times number of properties) |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 146  | 740                   | 246                      | 370  | For each additional invention to be examined (37 CFR § 1.129(a))           |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 149  | 740                   | 249                      | 370  | For each additional invention to be examined (37 CFR § 1.129(b))           |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 179  | 740                   | 279                      | 370  | Request for Continued Examination (RCE)                                    |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 169  | 900                   | 169                      | 900  | Request for expedited examination of a design application                  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>2. <input type="checkbox"/> Payment Enclosed:</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other  |                       |                          |  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>FEE CALCULATION</b>   |                       |                          |  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>2. BASIC FILING FEE</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td>740.00</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (1)</b></td><td>740.00</td></tr> </tbody> </table>   |                       |                          | Large Fee Code   | Entity Fee (\$)  | Small Fee Code | Entity Fee (\$) | Fee Description       | Fee Paid              | 101             | 740      | 201                | 370   | Utility filing fee | 740.00 | 106                                 | 330 | 206 | 165 | Design filing fee |  | 107            | 510             | 207             | 255      | Plant filing fee          |     | 108   | 740 | 208                    | 370   | Reissue filing fee |      | 114 | 160  | 214   | 80  | Provisional filing fee |     | <b>SUBTOTAL (1)</b> |   |                                       |     |     | 740.00 |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| Large Fee Code   | Entity Fee (\$)       | Small Fee Code           | Entity Fee (\$)  | Fee Description  | Fee Paid       |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 101  | 740                   | 201                      | 370  | Utility filing fee   | 740.00         |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 106  | 330                   | 206                      | 165  | Design filing fee  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 107  | 510                   | 207                      | 255  | Plant filing fee   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 108  | 740                   | 208                      | 370  | Reissue filing fee   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 114  | 160                   | 214                      | 80   | Provisional filing fee   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>SUBTOTAL (1)</b>  |                       |                          |  |  | 740.00         |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>1. EXTRA CLAIM FEES</b><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>38 - 20**</td><td>= 18 x</td><td>18 = 324.00</td><td></td></tr> <tr><td>Indep Claims 5-3**</td><td>= 2 x</td><td>84 = 168.00</td><td></td></tr> <tr><td>Multiple Dependent</td><td></td><td></td><td></td></tr> </tbody> </table><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="5" style="text-align: right;"><b>SUBTOTAL (2) \$</b></td><td>492.00</td></tr> </tbody> </table> |                       |                          | Total Claims   | Extra Claims   | Fee from below | Fee Paid        | 38 - 20**             | = 18 x                | 18 = 324.00     |          | Indep Claims 5-3** | = 2 x | 84 = 168.00        |        | Multiple Dependent                  |     |     |     | Large Fee Code    | Entity Fee (\$)  | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid | 103                       | 18  | 203   | 9   | Claims in excess of 20 |   | 102                | 84   | 202 | 42   | Independent claims in excess of 3                         |     | 104                    | 280 | 204                 | 140   | Multiple dependent claim, if not paid |     | 109 | 84     | 209                                    | 42  | ** Reissue independent claims over original patent |     | 110 | 18                                      | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2) \$</b>                 |     |       |     |     | 492.00                                  |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| Total Claims   | Extra Claims          | Fee from below           | Fee Paid   |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 38 - 20**  | = 18 x                | 18 = 324.00              |  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| Indep Claims 5-3**   | = 2 x                 | 84 = 168.00              |  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| Multiple Dependent   |                       |                          |  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| Large Fee Code   | Entity Fee (\$)       | Small Fee Code           | Entity Fee (\$)  | Fee Description  | Fee Paid       |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 103  | 18                    | 203                      | 9  | Claims in excess of 20   |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 102  | 84                    | 202                      | 42   | Independent claims in excess of 3  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 104  | 280                   | 204                      | 140  | Multiple dependent claim, if not paid                                      |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 109  | 84                    | 209                      | 42   | ** Reissue independent claims over original patent                         |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| 110  | 18                    | 210                      | 9  | ** Reissue claims in excess of 20 and over original patent                 |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| <b>SUBTOTAL (2) \$</b>   |                       |                          |  |  | 492.00         |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
| **or number previously paid, if greater; For Reissues, see above   |                       |                          | *Reduced by Basic Filing Fee Paid  |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |
|  |                       |                          | <b>SUBTOTAL (3) (\$)</b> 40.00   |  |                |                 |                       |                       |                 |          |                    |       |                    |        |                                     |     |     |     |                   |  |                |                 |                 |          |                           |     |       |     |                        |   |                    |      |     |      |   |     |                        |     |                     |   |                                       |     |     |        |  |     |  |     |     |   |     |     |  |     |  |     |       |     |     |   |     |       |     |     |  |     |     |     |     |                  |     |     |     |     |  |     |     |     |     |                          |     |       |     |       |   |     |     |     |    |                                  |     |       |     |     |                                    |     |       |     |     |                                |     |     |     |     |                  |     |     |     |     |                 |     |     |     |     |                               |     |    |     |    |                                     |     |     |     |     |   |     |    |     |    |  |     |     |     |     |  |     |     |     |     |  |     |     |     |     |   |     |     |     |     |   |

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|---------------------|---|----------------------------------|------------|-----------|----------------|
| <b>SUBMITTED BY</b> |   | <b>Complete (if applicable)</b>  |            |           |                |
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